

PATH Technical Assistance Evaluation Form Instructions

Thank you for taking the time to fill out this questionnaire. The information you provide will be critical in helping to design effective and responsive technical assistance.

Please note the following regarding this questionnaire:

1. The easiest way to fill out this form is directly on your computer. Simply save the attachment to your files, complete the form, and e-mail it back as an attachment. You can also print the form, fill it out by hand, and fax it back.
2. Throughout this form, TA means technical assistance.
3. Make sure to answer all questions, rather than leaving any blank.
4. Answer questions by simply clicking over the appropriate box and an X will appear. If you change your mind, click again and the X will disappear.
5. Text boxes are provided for some questions. We ask you to specify your answer by typing into the text box. If you complete the form by hand, rather than on the computer, you will see a blank space rather than a box.
6. If the text box does not have adequate space to type your response, feel free to attach your answer on a blank page. Make sure to type in "see attached" if you decide to do so.
7. Please return the form by January 28, 2003. It is important that not too much time elapse between your participation in the TA and your reflections on it.
8. **Please return the form by e-mail to: asanborn@ahpnet.com,
By Fax to: Amy Sanborn's attention at 978-443-4722**
9. If you have any questions, please call Amy Sanborn at 978-443-0055

Again, Thank You Very Much

PATH Technical Assistance Evaluation Form
National Teleconference
Working With Trauma Survivors Who Are Homeless
January 21, 2003

I. AUDIENCE CHARACTERISTICS

1. In what state/territory do you work?

2. Please check your affiliation:

- ☐ a. State PATH contact person
- ☐ b. PATH-funded direct service provider
- ☐ c. Non PATH-funded public agency official
- ☐ d. Non PATH-funded direct service provider
- ☐ e. Direct service provider-Not sure if my position is PATH-funded or not
- ☐ f. Other (*please specify*)
- _____

3. Is your current job any of the following (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> a. Counselor | <input type="checkbox"/> g. Administrator |
| <input type="checkbox"/> b. Outreach worker | <input type="checkbox"/> h. Planner/policy maker |
| <input type="checkbox"/> c. Case manager | <input type="checkbox"/> i. Advocate |
| <input type="checkbox"/> d. Shelter worker | <input type="checkbox"/> j. Other (<i>please specify</i>) |
| <input type="checkbox"/> e. Program coordinator | |
| <input type="checkbox"/> f. Program supervisor | |

4. Is the orientation of your program mainly:

- | | |
|---|---|
| <input type="checkbox"/> a. Mental health | <input type="checkbox"/> e. Housing |
| <input type="checkbox"/> b. Substance abuse | <input type="checkbox"/> f. Employment |
| <input type="checkbox"/> c. Dual diagnosis | <input type="checkbox"/> g. Other (<i>please specify</i>) |
| <input type="checkbox"/> d. Homelessness | |
- _____

5. How many years have you worked at your current job?

- ☐ a. Less than 1 year
- ☐ b. Between 1-3 years
- ☐ c. Between 4-7 years
- ☐ d. More than 8 years

6. Please indicate the highest education level you have completed?

- | | | | | |
|---|--|---------------------------------------|--|--|
| <input type="checkbox"/> Some High School | <input type="checkbox"/> Graduated High School/GED | <input type="checkbox"/> Some College | <input type="checkbox"/> Graduated College | <input type="checkbox"/> Advanced Degree |
|---|--|---------------------------------------|--|--|

II. SATISFACTION WITH TA ¹

<p>1. How would you rate your level of knowledge about this topic before the presentation?</p> <p><input type="checkbox"/> a. Novice/Beginner</p> <p><input type="checkbox"/> b. Slightly knowledgeable</p> <p><input type="checkbox"/> c. Somewhat knowledgeable</p> <p><input type="checkbox"/> d. Very knowledgeable</p> <p><input type="checkbox"/> e. Expert</p>	<p>2. How would you rate the content of the presentation?</p> <p><input type="checkbox"/> a. Poor</p> <p><input type="checkbox"/> b. Fair</p> <p><input type="checkbox"/> c. Good</p> <p><input type="checkbox"/> d. Very good</p> <p><input type="checkbox"/> e. Excellent</p>	
<p>3. How would you rate the quality of the presenter(s) (i.e., clarity of presentation, knowledge level, preparation)? (Please check the box that applies for each presenter)</p>		
<p style="text-align: center;">3.1 LORI BEYER</p> <p><input type="checkbox"/> a. Poor <input type="checkbox"/> d. Very good</p> <p><input type="checkbox"/> b. Fair <input type="checkbox"/> e. Excellent</p> <p><input type="checkbox"/> c. Good</p>	<p style="text-align: center;">3.2 MAXINE HARRIS</p> <p><input type="checkbox"/> a. Poor <input type="checkbox"/> d. Very good</p> <p><input type="checkbox"/> b. Fair <input type="checkbox"/> e. Excellent</p> <p><input type="checkbox"/> c. Good</p>	
<p>4. How would you rate the usefulness of the presentation for your work?</p> <p><input type="checkbox"/> a. Poor</p> <p><input type="checkbox"/> b. Fair</p> <p><input type="checkbox"/> c. Good</p> <p><input type="checkbox"/> d. Very good</p> <p><input type="checkbox"/> e. Excellent</p>	<p>5. How would you rate the scope and depth of the presentation?</p> <p><input type="checkbox"/> a. Much too complex</p> <p><input type="checkbox"/> b. Too complex</p> <p><input type="checkbox"/> c. About right</p> <p><input type="checkbox"/> d. Too simple</p> <p><input type="checkbox"/> e. Much too simple</p>	<p>6. Was the presentation worth your time and effort?</p> <p><input type="checkbox"/> a. Yes</p> <p><input type="checkbox"/> b. No</p> <p><input type="checkbox"/> c. Not sure</p>
<p>7. Was there anything you expected to get from the presentation but did not?</p> <p><input type="checkbox"/> a. Yes</p> <p><input type="checkbox"/> b. No</p> <p><input type="checkbox"/> c. Not sure</p>	<p>7.1 If yes, what? (<i>please explain</i>)</p>	
<p>8. Would you recommend a similar type of technical assistance to a peer?</p> <p><input type="checkbox"/> a. Yes</p> <p><input type="checkbox"/> b. No</p> <p><input type="checkbox"/> c. Not sure</p>		

III. NATIONAL PRESENTATION SPECIFIC QUESTIONS

<p>1. How did you participate in this presentation?</p> <p><input type="checkbox"/> By teleconference call <input type="checkbox"/> By web cast</p> <p><input type="checkbox"/> Through transcripts on the PATH web site</p>	<p>2. How would you rate the usefulness of the teleconference's accompanying materials?</p> <p><input type="checkbox"/> a. Poor <input type="checkbox"/> d. Very good</p> <p><input type="checkbox"/> b. Fair <input type="checkbox"/> e. Excellent</p> <p><input type="checkbox"/> c. Good <input type="checkbox"/> f. Did not read the materials</p>
<p>3. We are interested in your views on how the National Teleconference format works in comparison to other forms of training/TA. Are there aspects of the National Teleconference format that you find especially helpful as a TA delivery technique?</p> <p><input type="checkbox"/> a. Yes <input type="checkbox"/> b. No <input type="checkbox"/> c. Not sure</p> <p>3.1 Please explain:</p>	<p>4. How could we make this TA approach more useful?</p>

¹ Question 1-7 adapted from SPNS Cooperative Agreement Evaluation: Module 6

IV. PERCEIVED IMPACT OF TA

1. How would you rate your level of knowledge about this topic **after** technical assistance was provided?

- ☐ a. Novice/Beginner ☐ c. Somewhat knowledgeable ☐ Expert
☐ b. Slightly knowledgeable ☐ d. Very knowledgeable

2. What other impact is this TA likely to have on you and your work (check all that apply)?

- ☐ a. Increase my confidence in what I'm doing ☐ i. Change the way I approach my work in the following ways:
☐ b. Broaden my outlook or understanding about my work 2.i.1
☐ c. Increase my sensitivity to clients 2.i.2
☐ d. Increase my awareness of best treatment practices 2.i.3
☐ e. Encourage me to search out networking opportunities ☐ j. Other impact (*please specify*)
☐ f. Increase my participation in other PATH TA
☐ g. Feel more empowered in my work
☐ h. Inspire me to do better work ☐ k. No impact (*If no impact, please make sure to answer question 4, Section III above.*)

V. FACTORS AFFECTING USE OF PATH TA

1. How did you learn about the availability of this PATH TA opportunity (check all that apply):

- ☐ a. Notified by my state PATH contact person
☐ b. Notified by my supervisor
☐ c. Received a written notice through the mail from the PATH TA Center
☐ d. Received an e-mail notice through the PATH list-serve
☐ e. Saw it posted on the PATH bulletin board
☐ f. Saw it posted on the PATH web-site
☐ g. Notified by a colleague or friend
☐ h. Other (*please specify*)

2. What is the most important reason for your participating in this TA (check one):

- ☐ a. To gain new knowledge
☐ b. The topic is of special interest
☐ c. Be reassured that I am doing the best I can
☐ d. Develop networks with others working in the field
☐ e. Insure that my work is informed by best practices
☐ f. Improve my skills
☐ g. Address a unique problem in my state/at my program
☐ h. Inform my research, a paper or proposal
☐ i. I'm required to participate
☐ j. Other (*please specify*)

3. What are the factor(s) that helped you to participate in this TA (check all that apply):

- ☐ a. I got timely notification of this TA opportunity
☐ b. I was reminded through multiple postings of the availability of this TA
☐ c. Accompanying materials increased my interest
☐ d. My PATH state contact encouraged me to participate
☐ e. My supervisor allowed me to take the time necessary to participate
☐ f. I have the technology needed to participate(i.e., a computer, internet access, etc.)
☐ g. Other (*please specify*)

VI. FOLLOW UP

1. Would you be interested in any of these follow-up approaches to this TA presentation? (Check all that apply)

- ☐ a. conference call (s) ☐ d. on-site training ☐ f. Not interested in follow-up
☐ b. discussion page on the bulletin board ☐ e. Other follow-up(*please specify*)
☐ c. additional materials posted on the web

Thank you for completing this PATH Evaluation Form.

Please e-mail to asanborn@ahpnet.com or FAX to (978) 443-4722, Attn: Amy Sanborn